



Permit # _____

BUILDING PERMIT APPLICATION
Schedule inspection by 3:00 P.M. day prior
(303) 621-3140

Permit Fee _____

Property Owner _____ Phone _____ Date _____
Mailing Address _____
Street / PO Box _____ City _____ State _____ Zip _____
Address of Property _____
Subdivision _____ Intended Use _____
Contractor _____ Contractor # _____ Contractor Phone # _____

Parcel ID _____ Tax Dist _____ BOCC _____ Fire _____ School _____
Subdiv Code _____ Lot _____
Sec _____ Twn _____ Rng _____ #Acres _____ Zone _____
Structural Setback Minimums: F _____ S _____ R _____
Sq Ft: DWLF 1st flr _____ Sq Ft: DWLF 2nd flr _____ Sq Ft: GARF _____
Sq Ft: BSMU _____ Sq Ft: BSMF _____
SqFt DECK _____ Sq Ft CDEK _____
Group _____ Division _____ Type _____
Special Notes: _____

This permit includes plumbing & mechanical. Septic & driveway permits are issued separately.

Water well permits issued by **State Water Resources (303) 866-3587**

This application, when executed by the ELBERT COUNTY BUILDING INSPECTOR, and when an executed copy is furnished to the applicant, IS A BUILDING PERMIT.

Electrical permits issued by **State of Colorado (303) 894-2300**

TO SCHEDULE ELECTRICAL INSPECTIONS CALL (303) 621-2241

This permit is **void** unless work actually begins within **180 DAYS** of issuance or if work is suspended or abandoned for a period of **180 DAYS**.

Date Approved : Month _____ Day _____ Year _____
Expiration Date: Month _____ Day _____ Year _____

Six Month Extension: \$100.00 Date Paid _____
Expiration Date: Month _____ Day _____ Year _____

INSPECTION RECORD

*** Improvement Survey Due Now ***

SAN O LET MUST BE ON SITE

Caissons: ENGINEER REPORT REQUIRED

Footers: Size _____

Steel: _____

Foundation: _____

Steel: _____

Ground Plumbing: _____

License # _____

Rough Frame/Plumb/Heat: _____

Pressure Test: _____

Yard Line Pressure: _____

Rough Elec Appv: _____

Insulation Certificate: _____

Drywall: _____

Well Permit #: _____

Final Electric: _____

Final Driveway: _____

Septic Appv: _____

Final Frame/Plumb/Heat: _____

Certificate of Occupancy: _____

Fire Dept Appv: _____

Health Dept Appv: _____

Zoning Appv: _____

X

ELBERT COUNTY BUILDING INSPECTOR

APPLICANT SIGNATURE

BP _____ PR _____ ST _____ FD _____ DR _____

Revised 1/15/2004